

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

ADDRESS (number and street)

1125 17TH ST NW

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00624817

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

DC

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 20 2016

through

M M / D D / Y Y Y Y Y Y  
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

HICKEY, BRIAN, E, Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
01 06 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y  
11 / 28 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	2980.00	
(c) Total Receipts (from Line 19) .....	522318.24	2308985.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	525298.24	2308985.24
7. Total Disbursements (from Line 31).....	519689.36	2303376.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5608.88	5608.88
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	304499.88	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	1	6

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	522318.24	2308985.24
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	522318.24	2308985.24
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	522318.24	2308985.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	522318.24	2308985.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	522318.24	2308985.24

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	59137.62	59137.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	59137.62	59137.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	190000.00	1973687.00
24. Independent Expenditures (use Schedule E) .....	268559.87	268559.87
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1991.87	1991.87
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	519689.36	2303376.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	519689.36	2303376.36

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	522318.24	2308985.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	522318.24	2308985.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	59137.62	59137.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	59137.62	59137.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 138

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1839972.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.4941

Amount of Each Receipt this Period

53305.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2029972.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 27 / 2016

Transaction ID : SA11AI.4942

Amount of Each Receipt this Period

190000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2091346.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.4943

Amount of Each Receipt this Period

61374.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

304679.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 138

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2196985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 28 / 2016

Transaction ID : SA11AI.4944

Amount of Each Receipt this Period

105639.24

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2296985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2016

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2308985.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2016

Transaction ID : SA11AI.4971

Amount of Each Receipt this Period

12000.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

217639.24

TOTAL This Period (last page this line number only)..... ►

522318.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. CONCORD MARKETING SOLUTIONS**

Mailing Address 195 EXCHANGE BLVD

City  
GLENDALE HEIGHTSState  
ILZip Code  
60139Purpose of Disbursement  
Shirts, Hats for Canvassing Staff

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		04		2016

FEC Identification Number

C

Transaction ID : SB21B.4969

Amount of Each Disbursement this Period

6440.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LANDMARK STRATEGIES**

Mailing Address 8741 CENTER RD

City  
SPRINGFIELDState  
VAZip Code  
22152Purpose of Disbursement  
Live Calls

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		04		2016

FEC Identification Number

C

Transaction ID : SB21B.4960

Amount of Each Disbursement this Period

13940.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LANDMARK STRATEGIES**

Mailing Address 8741 CENTER RD

City  
SPRINGFIELDState  
VAZip Code  
22152Purpose of Disbursement  
Live Calls

004

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		04		2016

FEC Identification Number

C

Transaction ID : SB21B.4961

Amount of Each Disbursement this Period

9902.87

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

30283.95



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 138

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. LANDMARK STRATEGIES**

Mailing Address 8741 CENTER RD

City  
SPRINGFIELDState  
VAZip Code  
22152Purpose of Disbursement  
Live Calls

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4965

Amount of Each Disbursement this Period

4818.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VAROGA & ASSOCIATES**Mailing Address 2126 CONNECTICUT AVENUE NW  
SUITE 72City  
WASHINGTONState  
DCZip Code  
20008Purpose of Disbursement  
Consulting Expenses

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.4963

Amount of Each Disbursement this Period

24000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

28818.16

**TOTAL** This Period (last page this line number only)..... ►

59102.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. AMERICA VOTES ACTION FUND**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 1155 CONNECTICUT AVENUE, NW  
SUITE 600City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** C00492520**Transaction ID : SB23.4729**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOUSE MAJORITY PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 700 13TH ST NW  
SUITE 600City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** C00495028**Transaction ID : SB23.4731**

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LIFT LEADING ILLINOIS FOR TOMORROW**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2016

Mailing Address 3255 CENTRAL ST

City  
EVANSTONState  
ILZip Code  
60201Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** C00625525**Transaction ID : SB23.4734**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

175000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. PROGRESS UNITED PAC**

Mailing Address 2308 MT VERNON AVENUE SUITE 222

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
DONATION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

**C** C00616730**Transaction ID : SB23.4736**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
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FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

190000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

FEC Identification Number

C

**Transaction ID : SB29.4620**

Amount of Each Disbursement this Period

189.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C

**Transaction ID : SB29.4656**

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

FEC Identification Number

C

**Transaction ID : SB29.4657**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4660**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4664**

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4665**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

FEC Identification Number

C

**Transaction ID : SB29.4666**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

**Transaction ID : SB29.4675**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

**Transaction ID : SB29.4676**

Amount of Each Disbursement this Period

1264.87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				27				2016					

FEC Identification Number

C

**Transaction ID : SB29.4677**

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				28				2016					

FEC Identification Number

C

**Transaction ID : SB29.4788**

Amount of Each Disbursement this Period

207.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salaries & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				28				2016					

FEC Identification Number

C

**Transaction ID : SB29.4951**

Amount of Each Disbursement this Period

1259.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1259.58

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

FEC Identification Number

C

**Transaction ID : SB29.4790**

Amount of Each Disbursement this Period

207.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C

**Transaction ID : SB29.4909**

Amount of Each Disbursement this Period

239.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Candidate Name

**CANIZZARO, NICOLE, , ,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C

**Transaction ID : SB29.4912**

Amount of Each Disbursement this Period

2945.15

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4913**

Amount of Each Disbursement this Period

239.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION OF OPERATING ENGINEERS**

Mailing Address 1125 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
Canvassing Salary & Benefits

001

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4914**

Amount of Each Disbursement this Period

272.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4622**

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4624**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4625**

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4628**

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4629**

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Postage/Production Mailings

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	0			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4806**

Amount of Each Disbursement this Period

455.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4630**

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4631**

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4632**

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4633**

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4634**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4635**

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4636**

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4637

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4638

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4639

Amount of Each Disbursement this Period

82.26

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4640**

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4641**

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4642**

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4643**

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4644**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Postage/Production Mailings

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	5		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4807**

Amount of Each Disbursement this Period

455.48

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4645**

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4646**

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4647**

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4648**

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4649**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4680**

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0	0	0	0	0	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4711**

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4712**

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	7			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4713**

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

**Transaction ID : SB29.4714**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
POSTAGE

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

**Transaction ID : SB29.4741**

Amount of Each Disbursement this Period

732.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2016

FEC Identification Number

C

**Transaction ID : SB29.4709**

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

732.29

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**FUMO, OZZIE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4719**

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**COHEN, LESLEY, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4720**

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Candidate Name

**CANIZZARO, NICOLE, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4721**

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 138

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

Full Name (Last, First, Middle Initial)

**A. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Door Hangers

004

Category/  
Type

Candidate Name

**WOODHOUSE, JOYCE, , ,**

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4722**

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THOMPSON RYER**

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037Purpose of Disbursement  
Production Mailings

004

Category/  
Type

Candidate Name

**VAN OSTERN, COLIN, , Mr.,**

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	8			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.4808**

Amount of Each Disbursement this Period

211.38

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

1991.87

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 31 OF 138

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**INTERNATIONAL UNION OF OPERATING ENGINEERS**

Nature of Debt (Purpose):

Canvassing Salary &amp; Benefits

Mailing Address 1125 17TH ST NW

City

WASHINGTON

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

105639.24

Transaction ID : SD10.4541

Amount Incurred This Period

0.00

Payment This Period

105639.24

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**INTERNATIONAL UNION OF OPERATING ENGINEERS**

Nature of Debt (Purpose):

Canvassing Salary &amp; Benefits

Mailing Address 1125 17TH ST NW

City

WASHINGTON

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4977

Amount Incurred This Period

225246.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

225246.98

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LANDMARK STRATEGIES**

Nature of Debt (Purpose):

ROBO Calls

Mailing Address 8741 CENTER RD

City

SPRINGFIELD

State

VA

Zip Code

22152

Outstanding Balance Beginning This Period

922.58

Transaction ID : SD10.4542

Amount Incurred This Period

0.00

Payment This Period

922.58

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

225246.98

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 32 OF 138

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**EARN INTERNATIONAL UNION OF OPERATING ENGINEERS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THOMPSON RYER**Nature of Debt (Purpose):  
Door Hangers

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037

Outstanding Balance Beginning This Period

8132.56

Transaction ID : SD10.4543

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8132.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THOMPSON RYER**Nature of Debt (Purpose):  
Production of Mailings

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4979

Amount Incurred This Period

52145.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

52145.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**THOMPSON RYER**Nature of Debt (Purpose):  
Door Hangers

Mailing Address 2120 L Street, NW, #305.

City  
WashingtonState  
DCZip Code  
20037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4978

Amount Incurred This Period

18974.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

18974.64

1) **SUBTOTALS** This Period This Page (optional)..... ►

79252.90

2) **TOTALS** This Period (last page this line number only)..... ►

304499.88

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

304499.88



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 33 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">11408.50</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		<b>Transaction ID : SE.4385</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">119255.75</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">1138.00</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		<b>Transaction ID : SE.4386</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">8196.42</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 34 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Mailing Address 1125 17TH ST NW			Amount <span style="border: 1px solid black; padding: 2px;">189.67</span>		
City WASHINGTON		State DC	Zip Code 20036		Transaction ID : <b>SE.4387</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1345.83</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016		
Mailing Address 1125 17TH ST NW			Amount <span style="border: 1px solid black; padding: 2px;">2255.26</span>		
City WASHINGTON		State DC	Zip Code 20036		Transaction ID : <b>SE.4389</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 20 / 2016	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2255.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 35 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1767.09         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4390</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">13990.23</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 252.97         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4391</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">870.67</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 36 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           9360.40         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4392</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">128886.15</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1077.17         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4393</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8196.42</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr., [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 37 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           129.53         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4394</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1493.10</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2255.26         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4396</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4510.52</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*  
 Signature
 

*[Electronically Filed]*  
 Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 38 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">883.55</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">14873.78</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">117.81</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: TITUS, DINA, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">992.36</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 39 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2945.15         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4399</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4248.09</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 24 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5262.26         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4400</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 24 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President District: State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">134148.41</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date 

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 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 40 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div style="display: flex; justify-content: space-between;"><div>10</div><div>24</div><div>2016</div></div></div>
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2255.26</div> <b>Transaction ID : SE.4401</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div style="display: flex; justify-content: space-between;"><div>10</div><div>24</div><div>2016</div></div></div>		
City WASHINGTON		State DC			Zip Code 20036
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type			<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate: DRISKELL, GRETCHEN, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
			District: 07 State: MI		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">6765.78</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div style="display: flex; justify-content: space-between;"><div>10</div><div>25</div><div>2016</div></div></div>
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10032.71</div> <b>Transaction ID : SE.4546</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div style="display: flex; justify-content: space-between;"><div>10</div><div>25</div><div>2016</div></div></div>		
City WASHINGTON		State DC			Zip Code 20036
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type			<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate
			District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">144921.83</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
<div style="display: flex; justify-content: space-between;"> <div>(a) SUBTOTAL of Itemized Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) SUBTOTAL of Unitemized Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>(a) TOTAL Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div style="display: flex; justify-content: space-between;"><div>01</div><div>06</div><div>2017</div></div> </div>



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 41 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>	
Mailing Address <b>1125 17TH ST NW</b>		Amount <input style="width: 100%; border: 1px solid black;" type="text" value="1259.62"/>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	Transaction ID : <b>SE.4547</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <input style="width: 40px; border: 1px solid black;" type="text" value="001"/>	Date of Disbursement or Obligation <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>
Name of Federal Candidate: <b>HASSAN, MARGARET WOOD, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <input style="width: 100%; border: 1px solid black;" type="text" value="9456.04"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>	
Mailing Address <b>1125 17TH ST NW</b>		Amount <input style="width: 100%; border: 1px solid black;" type="text" value="209.94"/>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	Transaction ID : <b>SE.4548</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <input style="width: 40px; border: 1px solid black;" type="text" value="001"/>	Date of Disbursement or Obligation <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>
Name of Federal Candidate: <b>SHEA-PORTER, CAROL, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <input style="width: 100%; border: 1px solid black;" type="text" value="1738.52"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<input style="width: 100%; border: 1px solid black;" type="text" value="0.00"/>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<input style="width: 100%; border: 1px solid black;" type="text"/>	
(a) TOTAL Independent Expenditures .....		<input style="width: 100%; border: 1px solid black;" type="text"/>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <b>HICKEY, BRIAN, E, Mr.,</b>		Date <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> <input style="width: 20px; border: 1px solid black;" type="text" value="MM"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> <input style="width: 20px; border: 1px solid black;" type="text" value="DD"/> / <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/> <input style="width: 20px; border: 1px solid black;" type="text" value="YYYY"/>	
[Electronically Filed]		<b>01</b> / <b>06</b> / <b>2017</b>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">2255.26</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4549</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9127.49</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">1008.17</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4550</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">15881.95</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 43 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817         </div>
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 Check if ☐ 24-hour report    ☐ 48-hour report    ☒ New report    Amends report filed on MM / DD / YYYY

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 25 / 2016 </div>	
Mailing Address    1125 17TH ST NW				
City WASHINGTON	State DC	Zip Code 20036	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 101.17 </div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 4694.21 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 26 / 2016 </div>	
Mailing Address    1125 17TH ST NW				
City WASHINGTON	State DC	Zip Code 20036	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10226.29 </div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 189893.96 </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

MM / DD / YYYY  
 01 / 06 / 2017

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 44 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1636.27         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4594</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">11654.24</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2015.37         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4595</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 26 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">11706.70</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 45 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1125 17TH ST NW</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1008.17</div>	
City <b>WASHINGTON</b>		State <b>DC</b>		Zip Code <b>20036</b>	
Purpose of Expenditure <b>Canvassing Salary &amp; Benefits</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>MASTO, CATHERINE CORTEZ, , ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">17746.31</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1125 17TH ST NW</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">272.71</div>	
City <b>WASHINGTON</b>		State <b>DC</b>		Zip Code <b>20036</b>	
Purpose of Expenditure <b>Canvassing Salary &amp; Benefits</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>SHEA-PORTER, CAROL, , ,</b>				Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <b>01</b> State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2484.45</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 46 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report      Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 26 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           101.17         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4663</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 26 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4804.02</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 27 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10226.29         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4669</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 27 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support      Office Sought: <input type="checkbox"/> House      District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate      State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">202931.38</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  HICKEY, BRIAN, E, Mr.,		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            01 / 06 / 2017         </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 47 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">1636.27</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4670</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13396.96</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">272.71</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4671</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2774.90</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 48 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">2015.37</span>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13828.52</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 27 / 2016	
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">1008.17</span>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">18881.88</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....  <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="text-align: right;"> <span style="border: 1px solid black; padding: 2px;">0.00</span>  <span style="border: 1px solid black; padding: 2px;"></span>  <span style="border: 1px solid black; padding: 2px;"></span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 27 / 2016       </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 27 / 2016       </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         101.17       </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4674</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 27 / 2016       </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         4913.83       </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         2492.85       </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4756</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         341354.87       </div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>	
<b>(a) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature HICKEY, BRIAN, E, Mr.,		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          01 / 06 / 2017       </div>	
[Electronically Filed]		Date	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 50 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          /    /    /       </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Mailing Address    1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         1246.43       </div>		
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4757</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type    001	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HASSAN, MARGARET WOOD, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         15588.58       </div>	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         207.74       </div>		
Mailing Address    1125 17TH ST NW			<b>Transaction ID : SE.4789</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
City WASHINGTON	State DC	Zip Code 20036	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SHEA-PORTER, CAROL, , ,		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type    001	Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         3018.12       </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr., _____ Signature	<b>[Electronically Filed]</b>	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          01 / 06 / 2017       </div>
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 51 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>	
Mailing Address    1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         69910.38       </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4947</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">360860.24</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>	
Mailing Address    1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         7557.72       </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4948</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">15799.96</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">77468.10</div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          01 / 06 / 2017       </div>	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 52 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b>    C00624817         </div>
---	---

 Check if ☐ 24-hour report    ☐ 48-hour report    ☒ New report    Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address    1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1259.64</div> <b>Transaction ID : SE.4949</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NH	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">3229.50</div>				

Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address    1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13531.56</div> <b>Transaction ID : SE.4952</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 0 5px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salaries & Benefits		Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">14972.59</div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	14791.20
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 53 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Mailing Address <b>1125 17TH ST NW</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10602.54         </div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : SE.4953</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 28 / 2016         </div>
Purpose of Expenditure <b>Canvassing Salaries &amp; Benefits</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>MASTO, CATHERINE CORTEZ, , ,</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">31607.39</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	
Mailing Address <b>1125 17TH ST NW</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           594.39         </div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>	<b>Transaction ID : SE.4954</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 28 / 2016         </div>
Purpose of Expenditure <b>Canvassing Salaries &amp; Benefits</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: <b>TITUS, DINA, , ,</b>		Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1548.79</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">11196.93</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 54 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">923.43</div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4955</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salaries & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6343.06</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		2016	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1246.43</div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4783</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">17046.39</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		2016	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">923.43</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 55 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 29 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2492.85         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4784</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 29 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">363353.09</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 29 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           207.74         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4791</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 29 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3437.24</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 06 / 2017</div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9933.45</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4815</b>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">374815.86</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1437.40</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4816</b>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">18483.79</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>HICKEY, BRIAN, E, Mr.,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 57 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				
City WASHINGTON	State DC	Zip Code 20036	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Transaction ID : <b>SE.4819</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">16987.96</div>				

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				
City WASHINGTON	State DC	Zip Code 20036	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">239.57</div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Transaction ID : <b>SE.4904</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">3676.81</div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">294.52</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">31901.91</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">294.52</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: KIHUEN, RUBEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1077.34</div>				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(a) SUBTOTAL of Itemized Independent Expenditures</b> ..... ▶					
<b>(a) SUBTOTAL of Unitemized Independent Expenditures</b> ..... ▶					
<b>(a) TOTAL Independent Expenditures</b> ..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 59 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2015.37         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4831</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">19109.77</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1437.40         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4832</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 01 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">20027.63</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr., [Electronically Filed]  
 Signature Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 60 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Mailing Address 1125 17TH ST NW			Amount <span style="border: 1px solid black; padding: 2px;">7577.33</span>		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Transaction ID : <b>SE.4833</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">383133.88</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Mailing Address 1125 17TH ST NW			Amount <span style="border: 1px solid black; padding: 2px;">239.57</span>		
City WASHINGTON	State DC	Zip Code 20036			
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Transaction ID : <b>SE.4905</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2016		
Name of Federal Candidate: SHEA-PORTER, CAROL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3916.38</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
(a) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(a) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 61 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016							
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">12687.32</span>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>							
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">399787.38</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016							
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">1636.27</span>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>							
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NH							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">21770.34</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">0.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
HICKEY, BRIAN, E, Mr., _____ Signature				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 62 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 02 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2015.37         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4848</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 02 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">21231.58</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 02 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           272.71         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4906</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 02 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4189.09</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 63 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016							
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">589.03</span>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>							
Name of Federal Candidate: KIHUEN, RUBEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1666.37</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 02 / 2016							
Mailing Address 1125 17TH ST NW				Amount <span style="border: 1px solid black; padding: 2px;">589.03</span>							
City WASHINGTON		State DC		Zip Code 20036							
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>							
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6932.09</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">0.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
HICKEY, BRIAN, E, Mr., Signature				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2017							

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 64 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2015.37         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4861</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">23353.39</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1372.10         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4862</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">23248.88</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 65 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           9802.85         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4863</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">413311.05</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           228.68         </div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4907</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            11 / 03 / 2016         </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4417.77</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 66 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1372.10</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 67 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">9802.85</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4872</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">427943.74</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">3239.67</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4888</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 04 / 2016
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4906.04</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>HICKEY, BRIAN, E, Mr.,</i>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2017	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 68 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">228.68</div> <b>Transaction ID : SE.4908</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4646.45</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3239.67</div> <b>Transaction ID : SE.4889</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
City WASHINGTON	State DC	Zip Code 20036		
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KIHUEN, RUBEN, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">8145.71</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 69 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00624817</span> </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1125 17TH ST NW</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2356.12</div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>		
Purpose of Expenditure <b>Canvassing Salary &amp; Benefits</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">446507.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1125 17TH ST NW</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3239.67</div>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>		
Purpose of Expenditure <b>Canvassing Salary &amp; Benefits</b>		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		
Name of Federal Candidate: <b>KIHUEN, RUBEN, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11385.38</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 70 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9802.85</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">456310.19</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2015.37</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">27597.01</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 71 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">1372.10</span>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4897</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26205.96</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">2015.37</span>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4926</b>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">29718.82</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 72 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1372.10</div>	
City WASHINGTON	State DC	Zip Code 20036	<b>Transaction ID : SE.4927</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">27684.50</div>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9802.85</div>	
Mailing Address 1125 17TH ST NW		<b>Transaction ID : SE.4928</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>	
City WASHINGTON	State DC	Zip Code 20036	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> State:	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">473266.21</div>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>11 / 07 / 2016</div> </div>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature  
 HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date  /  /   

/  /

01 / 06 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 73 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>			
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016	
Mailing Address 1125 17TH ST NW		Amount <span style="border: 1px solid black; padding: 2px;">3239.67</span>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : <b>SE.4929</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	
Name of Federal Candidate: KIHUEN, RUBEN, ,		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14625.05</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>LANDMARK STRATEGIES</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 8741 CENTER RD		Amount <span style="border: 1px solid black; padding: 2px;">2175.93</span>	
City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : <b>SE.4554</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016
Purpose of Expenditure Live Calls		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">147097.76</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
<b>(a) TOTAL</b> Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 74 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4555</b> Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: <b>HASSAN, MARGARET WOOD, , ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9456.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4556</b> Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: <b>SHEA-PORTER, CAROL, , ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <b>01</b> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>NH</b>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1738.52</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
<b>(a) TOTAL Independent Expenditures .....</b>			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>HICKEY, BRIAN, E, Mr.,</b>		<b>[Electronically Filed]</b>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 75 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div> <div style="text-align: center;">10 25 2016</div>
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		Transaction ID : <b>SE.4557</b>
City SPRINGFIELD		State VA			
Purpose of Expenditure Live Calls		Category/ Type		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div> <div style="text-align: center;">10 25 2016</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">9127.49</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div> <div style="text-align: center;">10 25 2016</div>
Mailing Address 8741 CENTER RD			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		Transaction ID : <b>SE.4558</b>
City SPRINGFIELD		State VA			
Purpose of Expenditure Live Calls		Category/ Type		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div> <div style="text-align: center;">10 25 2016</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">15881.95</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
(a) TOTAL Independent Expenditures .....				<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  HICKEY, BRIAN, E, Mr.,			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div><div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div> <div style="text-align: center;">01 06 2017</div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 76 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure <b>Live Calls</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>ROSEN, JACKY, , ,</b>				Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4265.37</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure <b>Live Calls</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>TITUS, DINA, , ,</b>				Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1000.12</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 77 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		<b>Transaction ID : SE.4566</b>
City <b>SPRINGFIELD</b>		State <b>VA</b>	Zip Code <b>22152</b>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>Live Calls</b>		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Name of Federal Candidate:	
Name of Federal Candidate: <b>KIHUEN, RUBEN, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">259.01</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2070.44</div>		<b>Transaction ID : SE.4597</b>
City <b>SPRINGFIELD</b>		State <b>VA</b>	Zip Code <b>22152</b>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure <b>Live Calls</b>		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Name of Federal Candidate:	
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">191964.40</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(a) TOTAL Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>HICKEY, BRIAN, E, Mr.,</b>			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 78 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">877.69</div>
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4678</b> Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type <b>004</b>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">203809.07</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
Mailing Address <b>8741 CENTER RD</b>			Amount		<div style="border: 1px solid black; padding: 2px; text-align: right;">922.58</div>
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4733</b> Date of Disbursement or Obligation		
Purpose of Expenditure Live Calls		Category/Type <b>004</b>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">205472.34</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2016		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">922.58</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>HICKEY, BRIAN, E, Mr.,</b>			Date		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>
			<div style="border: 1px solid black; padding: 2px; text-align: center;">01</div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">06</div>
			<div style="border: 1px solid black; padding: 2px; text-align: center;">2017</div>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 79 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 30 / 2016         </div>		
Mailing Address <b>8741 CENTER RD</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1529.32         </div>		
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4812</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            10 / 30 / 2016         </div>		
Purpose of Expenditure <b>Live Calls</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           364882.41         </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            11 / 01 / 2016         </div>		
Mailing Address <b>8741 CENTER RD</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           3225.49         </div>		
City <b>SPRINGFIELD</b>	State <b>VA</b>	Zip Code <b>22152</b>	<b>Transaction ID : SE.4834</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            11 / 01 / 2016         </div>		
Purpose of Expenditure <b>Live Calls</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           386359.37         </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <b>HICKEY, BRIAN, E, Mr.,</b>		<b>[Electronically Filed]</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">           MM / DD / YYYY            01 / 06 / 2017         </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 80 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2980.13</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">402767.51</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3348.46</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure Live Calls				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">417400.20</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 81 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>	
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>
Mailing Address    8741 CENTER RD			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         9878.88       </div>
City SPRINGFIELD	State VA	Zip Code 22152	<b>Transaction ID : SE.4958</b> Date of Disbursement or Obligation		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          11 / 04 / 2016       </div>
Purpose of Expenditure Live Calls			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         437822.62       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee <b>LANDMARK STRATEGIES</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y       </div>
Mailing Address    8741 CENTER RD			Amount		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         6328.60       </div>
City SPRINGFIELD	State VA	Zip Code 22152	<b>Transaction ID : SE.4959</b> Date of Disbursement or Obligation		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          11 / 04 / 2016       </div>
Purpose of Expenditure Live Calls			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         444151.22       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         16207.48       </div>	
<b>(a) SUBTOTAL of Unitemized Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
<b>(a) TOTAL Independent Expenditures .....</b>				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          01 / 06 / 2017       </div>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6412.50</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure <b>Live Calls</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">463463.36</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item <b>LANDMARK STRATEGIES</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
Mailing Address <b>8741 CENTER RD</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6412.50</div>	
City <b>SPRINGFIELD</b>		State <b>VA</b>		Zip Code <b>22152</b>	
Purpose of Expenditure <b>Live Calls</b>				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">474006.88</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">6412.50</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</div> </div>	
[Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 83 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>			
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LOOKOUT MEDIA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address <b>PO BOX 33341</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           9584.33         </div>			
City <b>WASHINGTON</b>		State <b>DC</b>				Zip Code <b>20033</b>	
Purpose of Expenditure <b>VIDEO SHOOT - SUPREME COURT</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>					
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b> <div style="display: flex; justify-content: flex-end; align-items: center;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">325501.86</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LOOKOUT MEDIA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address <b>PO BOX 33341</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">           6680.08         </div>			
City <b>WASHINGTON</b>		State <b>DC</b>				Zip Code <b>20033</b>	
Purpose of Expenditure <b>VIDEO SHOOT - DECISION TIME</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>					
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b> <div style="display: flex; justify-content: flex-end; align-items: center;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div>				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">332181.94</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">0.00</div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> </div> </div>							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>			

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 84 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>			
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LOOKOUT MEDIA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address <b>PO BOX 33341</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">6680.08</div>			
City <b>WASHINGTON</b>		State <b>DC</b>				Zip Code <b>20033</b>	
Purpose of Expenditure <b>VIDEO SHOOT - DECISION TIME</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>					
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>TRUMP, DONALD J., ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">338862.02</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>LOOKOUT MEDIA</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address <b>PO BOX 33341</b>				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">3746.85</div>			
City <b>WASHINGTON</b>		State <b>DC</b>				Zip Code <b>20033</b>	
Purpose of Expenditure <b>VIDEO SHOOT - SUPREME COURT</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>					
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>CLINTON, HILLARY, RODHAM, ,</b>				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">345101.72</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">0.00</div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div> </div> </div>							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>			

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 85 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>							
Full Name of Payee <b>LOOKOUT MEDIA</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>						
Mailing Address <b>PO BOX 33341</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">26691.34</div>		Transaction ID : <b>SE.4962</b>						
City <b>WASHINGTON</b>		State <b>DC</b>	Zip Code <b>20033</b>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>							
Purpose of Expenditure <b>Video Commercials</b>			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>						
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose							
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">444151.22</div>				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____							
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <b>MOSAIC</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>						
Mailing Address <b>4801 VIEWPOINT PLACE</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">61374.00</div>		Transaction ID : <b>SE.4683</b>						
City <b>CHEVERLY</b>		State <b>MD</b>	Zip Code <b>20781</b>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>							
Purpose of Expenditure <b>DIGITAL ADS</b>			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>						
Name of Federal Candidate: <b>CLINTON, HILLARY, RODHAM, ,</b>				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose							
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">315176.84</div>				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____							
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width: 100%;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 40%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">88065.34</div> </td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">88065.34</div>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">88065.34</div>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>										
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <input type="text"/> / <input type="text"/> / <input type="text"/>							
[Electronically Filed]				Date <input type="text"/> / <input type="text"/> / <input type="text"/>							

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.71</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">119255.75</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p>(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p>(a) <b>TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 87 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">31829.21</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage / Production Mail Pieces				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">119255.75</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">455.48</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage / Production Mail Pieces				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8196.42</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

Date

01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 455.48         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4430</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1345.83</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 457.39         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4432</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  10 / 20 / 2016         </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*  
 Signature
 

*[Electronically Filed]*  
 Date MM / DD / YYYY  
 01 / 06 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 20 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           728.79         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4433</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 20 / 2016         </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">13990.23</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 20 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           184.59         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4434</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 20 / 2016         </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">870.67</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">216.53</div> <b>Transaction ID : SE.4436</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
City Washington	State DC	Zip Code 20037			
Purpose of Expenditure Postage / Production Mail Pieces		Category/ Type	004		
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		248.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">327.67</div> <b>Transaction ID : SE.4544</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016	
City Washington	State DC	Zip Code 20037			
Purpose of Expenditure Postage / Production Mail Pieces		Category/ Type	004		
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		1302.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	
(a) TOTAL Independent Expenditures .....	

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 91 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount <span style="border: 1px solid black; padding: 2px;">106.45</span>							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8196.42</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount <span style="border: 1px solid black; padding: 2px;">17.74</span>							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1363.57</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">0.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017							

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 92 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">127.40</div>			Transaction ID : <b>SE.4615</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
City Washington	State DC	Zip Code 20037						
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>						
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate		
District: _____ State: <b>NV</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">13990.23</div>		

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>			Transaction ID : <b>SE.4616</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
City Washington	State DC	Zip Code 20037						
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>						
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		
District: <b>01</b> State: <b>NV</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">874.55</div>		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 93 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;">           New report      Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">8.64</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4617</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1302.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">5.31</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4618</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 20 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support      Office Sought: <input checked="" type="checkbox"/> House      District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate      State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">248.39</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
<b>(a) TOTAL</b> Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 94 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.71</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">128886.15</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">4510.52</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

Date

01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 95 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>21<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4685</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>21<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">996.24</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>21<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5.31</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4690</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>21<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">253.70</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

01

06

2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 96 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination		
Mailing Address 2120 L Street, NW, #305.						<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>		
City Washington		State DC		Zip Code 20037		Amount		
Purpose of Expenditure Door Hangers		Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">4256.73</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination		
Mailing Address 2120 L Street, NW, #305.						<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>		
City Washington		State DC		Zip Code 20037		Amount		
Purpose of Expenditure Door Hangers		Category/ Type		<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 21 / 2016         </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1510.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 97 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.71</div> <b>Transaction ID : SE.4402</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
City Washington	State DC			Zip Code 20037
Purpose of Expenditure Door Hangers				Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">134889.12</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div> <b>Transaction ID : SE.4403</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2016		
City Washington	State DC			Zip Code 20037
Purpose of Expenditure Door Hangers				Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: DRISKELL, GRETCHEN, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">6872.23</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;"> </span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px; text-align: right;"> </span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,  
Signature
[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 98 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          / / /       </div>	

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination		
Mailing Address    2120 L Street, NW, #305.					<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 24 / 2016       </div>		
City Washington		State DC		Zip Code 20037		Amount	
Purpose of Expenditure Door Hangers		Category/ Type		004		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div> 3.88	
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 01		
					<input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div> 1000.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <b>THOMPSON RYER</b>			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination		
Mailing Address    2120 L Street, NW, #305.					<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 24 / 2016       </div>		
City Washington		State DC		Zip Code 20037		Amount	
Purpose of Expenditure Door Hangers		Category/ Type		004		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div> 5.31	
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 04		
					<input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div> 259.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div> 0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div>	
(a) TOTAL Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">         / / /       </div>	

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 99 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4698</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: ROSEN, JACKY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4265.37			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2120 L Street, NW, #305.			Amount <input type="text"/>		
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4706</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1528.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 0.00
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 100 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.70</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">147838.46</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9562.49</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(a) TOTAL</b> Independent Expenditures ..... ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 101 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">17.74</span> <b>Transaction ID : SE.4562</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1756.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">106.45</span> <b>Transaction ID : SE.4563</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 25 / 2016	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">9233.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,  
Signature
[Electronically Filed] Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 102 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">127.40</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4564</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">16009.35</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">31829.21</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4580</b>
Purpose of Expenditure Postage/Production Mailings		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">179667.67</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 103 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>			
Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 2120 L Street, NW, #305.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
City Washington State DC Zip Code 20037		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">455.48</div>	
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: NH		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">728.79</div>		Transaction ID : <b>SE.4581</b>	
Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 2120 L Street, NW, #305.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
City Washington State DC Zip Code 20037		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">728.79</div>	
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: NV		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">16738.14</div>		Transaction ID : <b>SE.4582</b>	
Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....  <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....  <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 300px;"> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div> </div> </div>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
[Electronically Filed]		01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 104 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           457.39         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4585</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           9691.33         </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           455.48         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4650</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           2211.74         </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         0.00       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 105 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           184.59         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4651</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1184.71</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           327.67         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4652</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Postage/Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4593.04</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 106 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">216.53</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Postage/Production Mailings				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">475.54</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 01 State: NV	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">1188.59</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]				01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 107 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           5.31         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4692</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">480.85</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           8.64         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4699</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 25 / 2016         </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4702.85</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

Signature

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

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 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 108 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div> <b>Transaction ID : SE.4598</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">192705.09</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div> <b>Transaction ID : SE.4599</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
City Washington	State DC	Zip Code 20037		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">11760.69</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures .....	►	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	►	
(a) TOTAL Independent Expenditures .....	►	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

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M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 109 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          / / /       </div>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 26 / 2016       </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         106.45       </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4600</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 26 / 2016       </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">11813.15</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 26 / 2016       </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         127.40       </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4601</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 26 / 2016       </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">17873.71</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

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*HICKEY, BRIAN, E, Mr.,*  
 Signature
 

*[Electronically Filed]*  
 Date    

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 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 110 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4688</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TITUS, DINA, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1192.47</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016			District: 01 State: NV	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.31</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4693</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KIHUEN, RUBEN, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">486.16</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016			District: 04 State: NV	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(a) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 111 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text" value="00000000.00"/> 8.64	
City Washington	State DC	Zip Code 20037		Transaction ID : <b>SE.4700</b>	
Purpose of Expenditure Door Hangers		Category/ Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="00000000.00"/> 4812.66		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text" value="00000000.00"/> 17.74	
City Washington	State DC	Zip Code 20037		Transaction ID : <b>SE.4707</b>	
Purpose of Expenditure Door Hangers		Category/ Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 26 / 2016	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="00000000.00"/> 2502.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text" value="00000000.00"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text" value="00000000.00"/>
(a) TOTAL Independent Expenditures .....	<input type="text" value="00000000.00"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr.,

Signature

**[Electronically Filed]**

Date  01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 112 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4689</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1196.35</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.31</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4694</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">491.47</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 113 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">8.64</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4701</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4922.47</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">17.74</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4708</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2792.64</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(a) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
(a) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 114 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">13934.97</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: State: NH	
Calendar Year-To-Date Per Election for Office Sought				<div style="border: 1px solid black; padding: 2px; text-align: right;">13503.41</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20037	Amount <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/>	Transaction ID : <b>SE.4717</b>		
		<input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20037	Amount <input type="text"/>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/>	Transaction ID : <b>SE.4718</b>		
		<input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr., _____ Signature	[Electronically Filed]	Date <input type="text"/> / <input type="text"/> / <input type="text"/>
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 116 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y         </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 27 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           48330.50         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4737</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 27 / 2016         </div>
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           253802.84         </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 27 / 2016         </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           710.67         </div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4738</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            10 / 27 / 2016         </div>
Purpose of Expenditure POSTAGE		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           14645.64         </div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           49041.17         </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           0.00         </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           49041.17         </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date 

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 117 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> </div>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-between;"> <div><div>10</div><div>27</div><div>2016</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>7</div><div>3</div><div>2</div><div>9</div></div> </div> </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4739</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-between;"> <div><div>10</div><div>27</div><div>2016</div></div> </div>		
Purpose of Expenditure POSTAGE			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>1</div><div>4</div><div>2</div><div>3</div><div>5</div><div>7</div></div> </div> </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016			<input type="checkbox"/> Other (specify) ▶		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-between;"> <div><div>10</div><div>27</div><div>2016</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>1</div><div>0</div><div>3</div><div>3</div><div>2</div><div>8</div></div> </div> </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4743</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div>M</div><div>M</div><div>M</div></div> <div><div>D</div><div>D</div><div>D</div></div> <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> </div> <div style="display: flex; justify-content: space-between;"> <div><div>10</div><div>27</div><div>2016</div></div> </div>		
Purpose of Expenditure POSTAGE			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>2</div><div>0</div><div>0</div><div>4</div><div>2</div><div>5</div><div>6</div></div> </div> </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016			<input type="checkbox"/> Other (specify) ▶		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div>1</div><div>7</div><div>6</div><div>5</div><div>5</div><div>7</div></div> </div> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div> </div><div> </div><div> </div><div> </div><div> </div><div> </div></div> </div> </div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="display: flex; justify-content: space-between;"> <div><div> </div><div> </div><div> </div><div> </div><div> </div><div> </div></div> </div> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date 

0

1

0

6

2

0

1

7

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 118 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">732.29</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4744</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">20774.85</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">245.96</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4745</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1442.31</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">978.25</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">01</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">06</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">2017</div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 119 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">488.52</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4746</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">5410.99</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">298.80</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4747</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure POSTAGE		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">790.27</div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">787.32</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 120 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20037	Amount <input type="text"/> 3.88		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Transaction ID : <b>SE.4695</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/> NV	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 1446.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Washington	State DC	Zip Code 20037	Amount <input type="text"/> 5.31		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/> 004	Transaction ID : <b>SE.4696</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: KIHUEN, RUBEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/> NV	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 795.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date  /  /



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 121 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4702</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">5419.63</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17.74</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4710</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NH		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">2810.38</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 122 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">106.45</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4723</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14752.09</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">106.45</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4724</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14342.15</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 123 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b>    C00624817       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          / / /       </div>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         127.40       </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4725</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>  NV  </u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">20902.25</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         740.69       </div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4726</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">         M M / D D / Y Y Y Y Y Y          10 / 28 / 2016       </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">315917.53</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*  
 Signature
 

*[Electronically Filed]*  
 Date    

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 124 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text" value="00000000.00"/> 15758.52	
City Washington	State DC	Zip Code 20037		Transaction ID : <b>SE.4794</b>	
Purpose of Expenditure Production Mailings		Category/ Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 28 / 2016	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="00000000.00"/> 360860.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 28 / 2016	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text" value="00000000.00"/> 211.38	
City Washington	State DC	Zip Code 20037		Transaction ID : <b>SE.4798</b>	
Purpose of Expenditure Production Mailings		Category/ Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 28 / 2016	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="00000000.00"/> 15799.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text" value="00000000.00"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text" value="00000000.00"/>
(a) TOTAL Independent Expenditures .....	<input type="text" value="00000000.00"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

  

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date  01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 125 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">102.60</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4799</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>
Purpose of Expenditure Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">21004.85</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">164.83</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4800</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>28<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>
Purpose of Expenditure Production Mailings		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">960.41</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(a) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date 

01

06

2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 126 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;">           New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">102.60</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4801</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 01 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1548.79</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">220.50</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4802</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 28 / 2016		
Purpose of Expenditure Production Mailings		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14972.59</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
<b>(a) TOTAL</b> Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 127 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4803</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Production Mailings		Category/Type <input type="text"/> 004	
Name of Federal Candidate: SHEA-PORTER, CAROL, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4809</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Production Mailings		Category/Type <input type="text"/> 004	
Name of Federal Candidate: KIHUEN, RUBEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 0.00
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 128 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>			
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>740.69</span> </div> <b>Transaction ID : SE.4820</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
City Washington		State DC				Zip Code 20037	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>					
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>375556.55</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>106.44</span> </div> <b>Transaction ID : SE.4821</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">10</div> <div style="border: 1px solid black; padding: 2px;">31</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>			
City Washington		State DC				Zip Code 20037	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>					
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: NH			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>18590.23</span> </div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span>0.00</span> </div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span></span> </div> </div> </div>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between; width: 100%;"> <span></span> <span></span> </div> </div> </div>							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>			

[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 129 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text"/>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4823</b>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>THOMPSON RYER</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2120 L Street, NW, #305.				Amount <input type="text"/>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4835</b>		
Purpose of Expenditure Door Hangers		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <input type="text"/> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="text"/>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(a) TOTAL Independent Expenditures .....	<input type="text"/>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*HICKEY, BRIAN, E, Mr.,*

Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 130 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>		
City Washington    State DC    Zip Code 20037		<b>Transaction ID : SE.4836</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HASSAN, MARGARET WOOD, , ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">20134.07</div>		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NH</u>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div>		
City Washington    State DC    Zip Code 20037		<b>Transaction ID : SE.4837</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">387100.06</div>		Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p>(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p>(a) <b>TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		

[Electronically Filed]

Date

01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 131 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817       </div>							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>											
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.44</div>							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MI							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">21338.02</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016							
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.44</div>							
City Washington		State DC		Zip Code 20037							
Purpose of Expenditure Door Hangers				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NH							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">21876.78</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">0.00</span></td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>	(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">0.00</span>										
(a) SUBTOTAL of Unitemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(a) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 132 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">740.69</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4852</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2016
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">403508.20</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

Full Name of Payee <b>THOMPSON RYER</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 03 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <span style="border: 1px solid black; padding: 2px;">106.44</span>	
City Washington	State DC	Zip Code 20037	Transaction ID : <b>SE.4864</b>
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 03 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23459.83</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>
(a) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"></span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,  
Signature
[Electronically Filed] Date MM / DD / YYYY  
01 / 06 / 2017

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 133 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NH</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">23355.32</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">414051.74</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 134 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span>				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4867</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input checked="" type="checkbox"/> House    District: <u>07</u>  <input type="checkbox"/> President    <input type="checkbox"/> Senate    State: <u>MI</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">23566.27</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address    2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.44</div>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4868</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought:    <input type="checkbox"/> House    District: _____  <input type="checkbox"/> President    <input checked="" type="checkbox"/> Senate    State: <u>NH</u> </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">23461.76</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
<b>(a) TOTAL</b> Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>HICKEY, BRIAN, E, Mr.,</i>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 135 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">04</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.69</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">418140.89</div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">11</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.67</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure Door Hangers				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; text-align: right;">457050.86</div>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....</p> <p><b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....</p> <p><b>(a) TOTAL</b> Independent Expenditures .....</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">01</div> <div style="border: 1px solid black; padding: 2px;">06</div> <div style="border: 1px solid black; padding: 2px;">2017</div> </div>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 136 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;">           New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">106.44</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4899</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26312.40</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">106.44</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4901</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 06 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>07</u> State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">27703.45</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
<b>(a) TOTAL</b> Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 137 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00624817         </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;">             New report      Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">106.44</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4930</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , , <div style="float: right;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose           </div>			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">29825.26</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount <span style="border: 1px solid black; padding: 2px;">106.44</span>		
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4931</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 07 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , , <div style="float: right;"> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose           </div>			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">27790.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;">0.00</span>		
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
<b>(a) TOTAL</b> Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 01 / 06 / 2017	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 138 OF 138  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>EARN INTERNATIONAL UNION OF OPERATING ENGINEERS</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 2em; margin-right: 10px;">C</span> <span>C00624817</span> </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>THOMPSON RYER</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">740.67</div>	
City Washington	State DC	Zip Code 20037	<b>Transaction ID : SE.4932</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">474006.88</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"></div>	
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(a) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">268559.87</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y